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<b>UTILITY PATENT APPLICATION TRANSMITTAL</b> <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>		<b>Attorney Docket No.</b> 0819-374 <b>First Inventor or Application Identifier:</b> Takeshi TAKAGI et al. <b>Title:</b> BIPOLAR TRANSISTOR AND SEMICONDUCTOR DEVICE <b>Express Mail Label No.</b>
<b>APPLICATION ELEMENTS</b> <small>See MPEP chapter 600 concerning utility patent application contents.</small>		<b>ADDRESS TO:</b> Assistant Commissioner for Patents Box Patent Application Washington, DC 20231
<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original, and a duplicate for fee processing)</i></p> <p>2. <input checked="" type="checkbox"/> Specification <span style="float: right;">Total Pages [62]</span> <i>(preferred arrangement set forth below)</i></p> <ul style="list-style-type: none"><li>- Descriptive title of the Invention</li><li>- Cross References to Related Applications</li><li>- Statement Regarding Fed sponsored R &amp; D</li><li>- Reference to Microfiche Appendix</li><li>- Background of the Invention</li><li>- Brief Summary of the Invention</li><li>- Brief Description of the Drawings <i>(if filed)</i></li><li>- Detailed Description</li><li>- Claim(s)</li><li>- Abstract of the Disclosure</li></ul> <p>3. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) <span style="float: right;">Total Sheets [14]</span></p> <p>4. <input checked="" type="checkbox"/> Oath or Declaration <span style="float: right;">Total Pages [3]</span></p> <ul style="list-style-type: none"><li>a. <input type="checkbox"/> Newly executed (original or copy)</li><li>b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <i>(for continuation/divisional with Box 17 completed)</i> <span style="margin-left: 20px;">[Note Box 5 below]</span></li><li>i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</li></ul> <p>5. <input checked="" type="checkbox"/> Incorporation By Reference <i>(useable if Box 4b is checked)</i> The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered to be part of the disclosure of the accompanying application and is hereby incorporated by reference therein.</p>		<p>6. <input type="checkbox"/> Microfiche Computer Program <i>(Appendix)</i></p> <p>7. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i></p> <ul style="list-style-type: none"><li>a. <input type="checkbox"/> Computer Readable Copy</li><li>b. <input type="checkbox"/> Paper Copy (identical to computer copy)</li><li>c. <input type="checkbox"/> Statement verifying identity of above copies</li></ul> <hr/> <p style="text-align: center;"><b>ACCOMPANYING APPLICATION PARTS</b></p> <p>8. <input type="checkbox"/> Assignment Papers (cover sheet &amp; document(s))</p> <p>9. <input type="checkbox"/> 37 CFR 3.73(b) Statement <span style="float: right;"><input type="checkbox"/> Power of Attorney</span> <i>(when there is an assignee)</i></p> <p>10. <input type="checkbox"/> English Translation Document <i>(if applicable)</i></p> <p>11. <input checked="" type="checkbox"/> Information Disclosure Statement <span style="float: right;"><input type="checkbox"/> Copies of IDS Citations</span> <span style="margin-left: 20px;">(IDS)/PTO-1449</span></p> <p>12. <input checked="" type="checkbox"/> Preliminary Amendment</p> <p>13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i></p> <p>14. <input type="checkbox"/> *Small Entity <span style="float: right;"><input type="checkbox"/> Statement filed in prior application,</span> <span style="margin-left: 20px;">Statement(s) <span style="margin-left: 20px;">Status still proper and desired</span></span> <span style="margin-left: 20px;">(PTO/SB/09-12)</span></p> <p>15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i></p> <p>16. <input checked="" type="checkbox"/> Other: Notice of Change of Company Name and Address</p> <p style="margin-top: 10px;"><small>*A new statement is required to be entitled to pay small entity fees, except where one has been filed in a prior application and is being relied upon.</small></p>
<p>17. If a <b>CONTINUING APPLICATION</b>, check appropriate box, and supply the requisite information below and in a preliminary amendment:</p> <p>Divisional of prior application Serial No. 09/252,908, filed February 19, 1999</p> <p>Prior application information: Examiner: J. Guay <span style="float: right;">Group/Art Unit: 2814</span></p>		
<b>18. CORRESPONDENCE ADDRESS</b>		
<p><input checked="" type="checkbox"/> Customer Number or Bar Code Label <span style="float: right;">Customer No. 22204</span> <span style="float: right;">or <input type="checkbox"/> Correspondence address below</span></p> <p style="text-align: center;"><small>(Insert Customer No. or Attach bar code label here)</small></p> <p>Name: Eric J. Robinson Firm: NIXON PEABODY LLP Address: 8180 Greensboro Drive, Suite 800 City: McLean <span style="margin-left: 100px;">State: VA</span> <span style="float: right;">Zip Code: 22102</span> Country: U.S.A. <span style="margin-left: 100px;">Telephone (703) 790-9110</span> <span style="float: right;">FAX (703) 883-0370</span></p> <p>Name: Eric J. Robinson <span style="float: right;">Registration No. 38,285</span></p> <p>Signature  <span style="float: right;">Date: 9-8-00</span></p>		

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FEE TRANSMITTAL		Complete If Known																																					
<i>Patent fees are subject to annual revision on October 1. These are the fees effective October 1, 1997. Small Entity payments must be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12.</i>		Application Number																																					
		Filing Date		September , 2000																																			
		First Named Inventor		Takeshi TAKAGI et al.																																			
		Examiner Name		J. Guay																																			
		Group Art Unit		2814																																			
TOTAL AMOUNT OF PAYMENT		\$690.00		Attorney Docket Number		0819-374																																	
METHOD OF PAYMENT (check one)				3. ADDITIONAL FEES Large Entity      Small Entity																																			
1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to: Deposit Account No. 19-2380 Deposit Account Name: NIXON PEAODY LLP  <input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 <input type="checkbox"/> Charge the Issue Fee Set in 37 CFR 1.18 at the Mailing of the Notice of Allowance  2. <input checked="" type="checkbox"/> Payment Enclosed: <input checked="" type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other				FEE CALCULATION (continued)																																			
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1. BASIC FILING FEE <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Large Entity</th> <th>Small Entity</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> <tr> <th>Code (\$)</th> <th>Code (\$)</th> <th></th> <th></th> </tr> </thead> <tbody> <tr> <td>101 690</td> <td>201 345</td> <td>Utility filing fee</td> <td>[690]</td> </tr> <tr> <td>106 310</td> <td>206 155</td> <td>Design filing fee</td> <td>[ ]</td> </tr> <tr> <td>107 480</td> <td>207 240</td> <td>Plant filing fee</td> <td>[ ]</td> </tr> <tr> <td>108 690</td> <td>208 345</td> <td>Reissue filing fee</td> <td>[ ]</td> </tr> <tr> <td>114 150</td> <td>214 75</td> <td>Provisional filing fee</td> <td>[ ]</td> </tr> <tr> <td colspan="3" style="text-align: right;">SUBTOTAL (1)</td> <td>\$690.00</td> </tr> </tbody> </table>				Large Entity	Small Entity	Fee Description	Fee Paid	Code (\$)	Code (\$)			101 690	201 345	Utility filing fee	[690]	106 310	206 155	Design filing fee	[ ]	107 480	207 240	Plant filing fee	[ ]	108 690	208 345	Reissue filing fee	[ ]	114 150	214 75	Provisional filing fee	[ ]	SUBTOTAL (1)			\$690.00				
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2. EXTRA CLAIM FEES      Extra Claims      Fee from Below      Fee Paid Total Claims      10 - 20** = 0 X \$18.00 = _____ Independent Claims      1 - 3** = 0 X \$78.00 = _____ Multiple Dependent Claims      \$260.00 = _____ **or number previously paid, if greater, For Reissues, see below <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Large Entity</th> <th>Small Entity</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> <tr> <th>Code (\$)</th> <th>Code (\$)</th> <th></th> <th></th> </tr> </thead> <tbody> <tr> <td>103 18</td> <td>203 9</td> <td>Claims in excess of 20</td> <td></td> </tr> <tr> <td>102 78</td> <td>202 39</td> <td>Independent claims in excess of 3</td> <td></td> </tr> <tr> <td>104 260</td> <td>204 130</td> <td>Multiple dependent claim</td> <td></td> </tr> <tr> <td>109 78</td> <td>209 39**</td> <td>Reissue independent claims over original patent</td> <td></td> </tr> <tr> <td>110 18</td> <td>210 9</td> <td>**Reissue claims in excess of 20 and over original patent</td> <td></td> </tr> <tr> <td colspan="3" style="text-align: right;">SUBTOTAL (2)</td> <td>- 0 -</td> </tr> </tbody> </table>				Large Entity	Small Entity	Fee Description	Fee Paid	Code (\$)	Code (\$)			103 18	203 9	Claims in excess of 20		102 78	202 39	Independent claims in excess of 3		104 260	204 130	Multiple dependent claim		109 78	209 39**	Reissue independent claims over original patent		110 18	210 9	**Reissue claims in excess of 20 and over original patent		SUBTOTAL (2)			- 0 -				
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